

A Study to Assess the Effectiveness of Planned Teaching Programme in Improving the Knowledge and Practice Regarding Plotting of Partograph Among Nurses Working in Labour Room



Medical Science

KEYWORDS :

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ABSTRACT

Active management of third stage labour has three sample components. Administration of appropriate uterotonics (oxytocin/misoprostol) immediately after the delivery of the baby controlled cord traction and uterine massage. Partograph is a very simple tool to note down the progress of labour and it alerts the user to decide on future course of action. For the leading obstetricians in India and the teachers in the medical colleges, there is nothing new about active management of third stage of labour and partograph. No one has got any doubt on the benefits of active management of third stage of labour and partograph. The precise timing of medical intervention for women in prolonged labour in the subject of a considerable debate. The partograph action line is a tool to assist practitioners in the correct diagnosis of prolonged labour. Despite its widespread use, the precise timing of the action line has not been rigorously studied, and women's views have rarely been sought. The aim of this study was to assess the effect on maternal satisfaction of managing labour using partograph with action line drawn at 2,3 or 4 hours to the right of the alert line

To assess the effectiveness of planned teaching on knowledge and practice regarding plotting of partograph among nurses working in labour room of selected hospitals.

There is marked improvement of score the post test is evident as 100% of sample had excellent score. Thus it can be concluded that there is a significant difference between pre and post test knowledge and practice score. The result of this study shows that the most of the nurses had excellent knowledge and practices after giving Planned Teaching Module between pre and post test knowledge and practices regarding plotting of partograph among nurses working in labour room

The various findings of the study show that in pre-teaching phase almost all the samples except few were having lack of knowledge regarding Objective of partograph, Components of partograph, Uses of partograph, Advantages of partograph nurses gained their knowledge in basic things, as they can disseminate the knowledge among the other nurses and nursing students, and ultimately nation will be benefited. Reinforcement continuation is required to keep the update of gained knowledge.

Introduction:

The partogram (or partograph) is a simple, inexpensive tool to provide a continuous pictorial overview of labour. Many hospitals now use a partograph to assist them in the detection of prolonged labour. This briefing provides a short history of the development of the partograph. An important development in the management of labour was the introduction of the partograph. First developed by Hugh Philpott in 1972 to identify abnormally slow labour, the partograph is a graphical representation of the changes that occur in labour, including cervical dilatation, fetal heart rate, maternal pulse, blood pressure, and temperature; it also shows a numerical record of features such as urine output and the volume and type of intravenous infusions (including oxytocin drips). It is therefore possible at a glance to identify deviations from normal in any of these variables.

The main aim of the study was to assess the knowledge and practices of nurses and effectiveness of planned teaching regarding plotting of partograph in selected hospitals of Vidarbha region.

E. A. Friedman first described this graphicostatistical analysis of progress of labour in primigravida and multipara in 1954. "It is a composite graphical record of cervical dilation and descent of head against duration of labour in hours. It also gives information about Fetal and maternal condition that are all recorded on a single sheet of paper"¹

Abdovlie Sankareh, regional health director for western region said capacity building is essential to keep people abreast of development affecting their careers. He observed that training the midwives on the use of the partograph will go a long way in reducing infant mortality in the country. According to him, since the introduction of the partograph in the country last year, there has been a significant drop in the number of deaths especially during birth. 2(Sheikh Abdullah jah charitable foundation,at

the boardroom of the royal Victoria teaching Hospital(RVTH) in Banjul.)

According to WHO, Maternal Mortality is currently estimated to be 529,000 death per year, a global ration of 400 maternal deaths per 1,00,000 live births. Between 11 to 17 percent of maternal deaths happen during child birth itself, and between 50 to 71 percent in the postpartum period. About 45 percent of postpartum maternal deaths occur during the first 24 hour, and more than two thirds during the first weeks.

Active management of third stage labour has three sample components. Administration of appropriate uterotonics (oxytocin/misoprostol) immediately after the delivery of the baby controlled cord traction and uterine massage. (N.S. Iyer 21 July 2008)

Partograph is a very simple tool to note down the progress of labour and it alerts the user to decide on future course of action. For the leading obstetricians in India and the teachers in the medical colleges, there is nothing new about active management of third stage of labour and partograph. No one has got any doubt on the benefits of active management of third stage of labour and partograph.³ (Compiled by Meghendra Banergee ,Resource person and deeksha, Research Associate ,Tamilnadu.)

The precise timing of medical intervention for women in prolonged labour in the subject of a considerable debate. The partograph action line is a tool to assist practitioners in the correct diagnosis of prolonged labour. Despite its widespread use, the precise timing of the action line has not been rigorously studied, and women's views have rarely been sought. The aim of this study was to assess the effect on maternal satisfaction of managing labour using partograph with action line drawn at 2,3 or 4 hours to the right of the alert line.⁴ (school of nursing , midwifery and social work , university of Manchester , oxford road,

Manchester, UK, M139PL.)

Aims and objectives:

- 1) To assess the existing knowledge regarding plotting of partograph among nurses working in labour room.
- 2) To assess the existing practice regarding plotting of partograph among nurses working in labour room.
- 3) To evaluate the effectiveness of planned teaching.
- 4) To find out the association between knowledge and selected demographic variable.
- 5) To find out the association between practice and selected demographic variable.
- 6) To find out the association between knowledge and practice

Material and methods: Key:

- O₁ PRETEST
- X PLANNED TEACHING
- O₂ POST TEST

The research design selected for the present study was one group pre and post test research design without control group.

Sample	Pre test	Intervention	Post test
	Day 1	Day 1	Day 7
Nurses	O ₁	X	O ₂

It helps to researcher in selection of subject, manipulation of the experience variable and procedure of data collection. SCHEMATIC PRESENTATION OF THE STUDY DESIGN

Sample	Tool	Sample Technique	Test	Treatment
Nurses working in labour room in selected area of hospital	Questionnaires and Observation checklist regarding plotting of partograph	Non probability convenience sampling	Questionnaires and Observation Checklist Method.	Planned Teaching.

STATISTICAL ANALYSIS OF THE STUDY

This chapter deals with analysis and interpretation of the data collected for this study. Analysis and interpretation was done based on objectives of the study. The data was analysed and is presented in the following tables.

SECTION- I

In this study it was found that 56.7% of sample belongs to the age group of 26-30 year ,100% was female 73.3% was General nursing midwifery. All the samples had different of experience ,50% Of sample having clinical experience is 8 -13 year and 46.7% sample having experience in present labour room is above 5 year, 83.3% sample know about partograph and 86.7% sample having no previous experience in plotting of partograph,13.3% of sample having previous experience in plotting of partograph.

Table 4.1: Percentage wise distribution of nurses working in labour room according to their demographic characteristics. n=30

Demographic Variables	No. of nurses	Percentage(%)
Age(yrs)		
19-21	0	0.00
22-25	1	3.3
26-30	17	56.7
>30	12	40.0
Gender		
Male	0	0.00
Female	30	100.00
Professional Qualification		
ANM	8	26.7
GNM	22	73.3

PBBSc	0	0.00
Basic B.Sc	0	0.00
Duration of clinical experience		
Less than 2 years	0	0.00
2 to 7 years	6	20.0
8 to 13 years	15	50.0
Above 13 years	9	30.0
Years of experience in present labour room		
Up to 1 year	0	0.00
2 to 3 years	7	23.3
4 to 5 years	9	30.0
Above 5 years	14	46.7
Knowledge about Partograph		
Yes	25	83.3
No	5	16.7
Previous experience in plotting of Partograph		
Yes	4	13.3
No	26	86.7

Figure4.1: Percentage wise distribution of nurses working in labour room according to their age

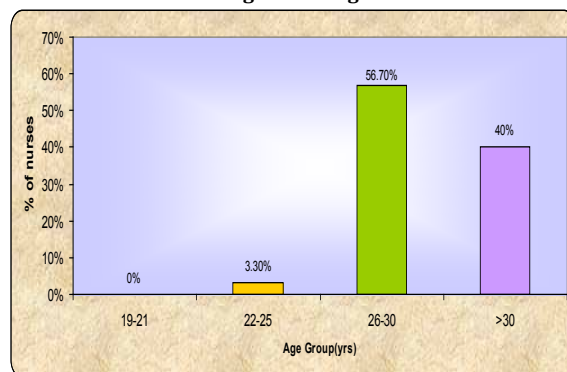


Figure 4.2: Percentage wise distribution of nurses working in labour room according to their professional qualification

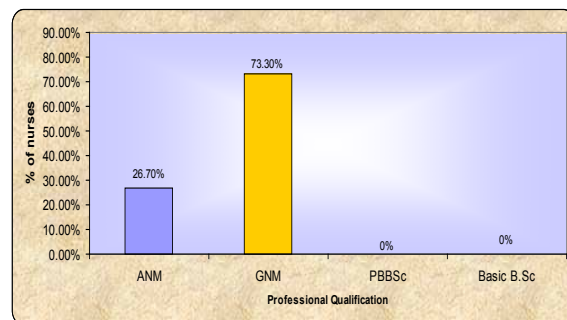


Figure 4.3: Percentage wise distribution of nurses working in labour room according to duration of clinical experience

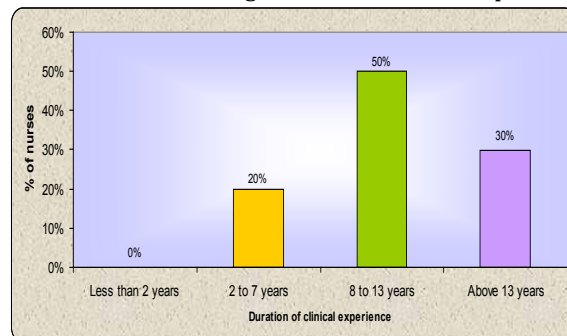


Figure 4.4: Percentage wise distribution of nurses working in labour room according to years of experience in present labour room

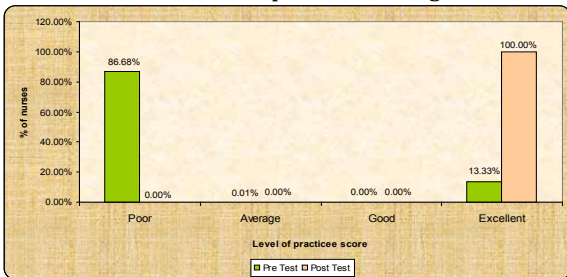


Table 4.2: Level of knowledge score of nurses working in labour room before and after planned teaching

Level of knowledge score	Pre Test	Post Test
Poor(0-5)	2 (6.67%)	0 (0.00%)
Average(6-10)	12 (40.007%)	0 (0.00%)
Good(11-15)	15 (50.00%)	0(0.00%)
Excellent(16-20)	1 (3.33%)	30 (100.00%)

The above table show that 6.67% of the sample had poor knowledge score(2) and 50% of sample had good knowledge score (15)in the pretest, the knowledge score of sample show marked improvement in the post test, 100% of the sample had excellent score ie (30) .

Figure 4.5: Level of practice score of nurses working in labour room before and after planned teaching



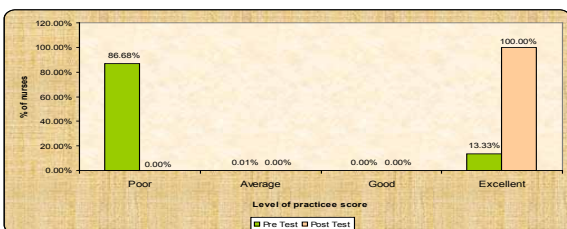
SECTION II

Table 4.3: Level of practice score of nurses working in labour room before and after planned teaching

Level of practice score	Pre test	Post test
Poor (0 -3)	26 (86.6767%)	0 (0.00%)
Average (4 - 7)	0(0.00%)	0(0.00%)
Good (8 - 11)	0(0.00%)	0(0.00%)
Excellent (12 - 14)	4(13.33%)	30(100%)

The above table show that 86.67% of the sample had poor practice score(26) and 13.33%of sample had excellent practice score in the pretest the practice score (4)of sample show marked improvement in the post test ie 100% had excellent score ie(30)

Figure 4.6: Level of practice score of nurses working in labour room before and after planned teaching



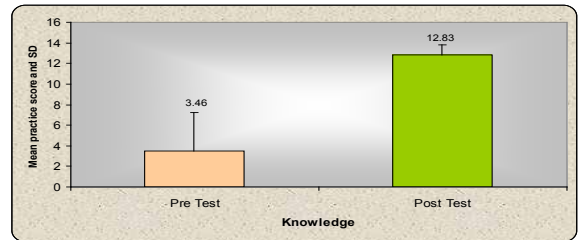
SECTION III

SIGNIFICANT DIFFERENCE OF KNOWLEDGE SCORE REGARDING PLOTTING OF PARTOGRAPH AMONG NURSES BEFORE AND AFTER PLANNED TEACHING

Table 4.4: Significance of difference between overall knowledge score in relation to plotting of partograph among nurses before and after planned teaching

Overall	Obtained maximum score out of 20	Mean	SD	t-value	P value
Pretest	17	10.6	3.11	15.19	0.00 <0.05
Posttest	20	18.2	1.32		

Figure 4.8 : Significance of difference between practice score in relation to plotting of partograph among nurses before and after planned teaching



DISCUSSION

This chapter discusses the findings of the study to assess the effectiveness of Planned Teaching regarding plotting of partograph in improving the knowledge and practices level of Nurses in selected Hospital of Vidarbha region. In order to achieve the objectives of the study, an evaluative research approach was adopted. Non-probability convincing sampling technique was used to select the sample. The data was collected from Nurses working in labour room in selected hospital of Vidarbha region.

Section I: Description of the Nurses according to their demographic Variables.

Section II: Assessment of pre and post test knowledge score of Nurses regarding plotting of partograph.

Section III: Assessment of pre and post test the Practices score of nurses regarding plotting of partograph.

SUMMARY:

The result of study can be used as an informative illustration to the nurses so that nurses can give the proper instructions to the nursing students about plotting of partograph. his study will help the nurses use this knowledge in routine properly.

NURSING ADMINISTRATION

Findings of the study can be used by the Nursing Administrator in creating policies and plans that will include all nurses and nursing students, to be effectively involved in in-service education programs in their respective hospital area. It will help the nursing administrator to be planned and organized and in giving continuing education to groups.

NURSING RESEARCH

The study forms a base for further study in the field. Research should be done to find out the effectiveness of Planned Teaching module. The research methodology, tool and findings of study can be added to the nursing literature. The finding of the study shows areas, which needs further explanation. It provides an avenue for further studies in this subject. The suggestions and recommendations can be utilized by other researchers conducting further studies in the same field.

CONCLUSION:

The study was done to assess the effectiveness of planned teaching on knowledge and practice regarding plotting of partograph among nurses working in labour room of selected hospitals in

Vidharba region. The result of this study shows that the most of the nurses had excellent knowledge and practices after giving Planned Teaching Module between pre and post test knowledge and practices regarding plotting of partograph among nurses working in labour room. There is no significant association between knowledge findings and practices score with demographic variables except Experience in plotting partograph score. This study will help the nurses to develop appropriate using to improve knowledge and practices regarding plotting partograph.

The various findings of the study show that in pre-teaching phase almost all the samples except few were having lack of knowledge regarding Objective of partograph, Components of partograph, Uses of partograph, Advantages of partograph nurses gained their knowledge in basic things, as they can disseminate the knowledge among the other nurses and nursing students, and ultimately nation will be benefited. Reinforcement continuation is required to keep the update of gained knowledge.

REFERENCE

1. E. A. Friedman 1954 | 2. Sheikh Abdullah jah charitable foundation, at the boardroom of the royal Victoria teaching Hospital (RVTH) in Banjul
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